Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ALABAMA, EASTERN DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Scott First name  Michael Middle name  Long Last name and Suffix (Sr., Jr., II, III)	Nancy First name  Diana Middle name  Long Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3096	xxx-xx-3080

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)		
			LING		
5.	Where you live	1728 Rainbow Ave. S.	If Debtor 2 lives at a different address:		
		Rainsville, AL 35986  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		De Kalb County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	stor 1 Scott Michael Lon Nancy Diana Long	_			_	Case n	umber (if known)	
Par	t 2: Tell the Court About	our Ba	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Ch	napter 7					
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		☐ Ch	napter 13					
8.	How you will pay the fee		about how you order. If your a pre-printed a		ire paying ayment on	the fee yourself, y your behalf, your	ou may pay with cash attorney may pay with	n, cashier's check, or money n a credit card or check with
				the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Applica	ation for Individuals to Pay
			I request that but is not requ applies to you	t my fee be waived (You ma	ay request may do so able to pay	only if your incon the fee in installr	ne is less than 150% onents). If you choose t	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	□ No ■ Yes						
			District	Northern District of Alabama, Eastern Division	When	5/21/09	Case number	09-41493-JJR7
			District		— When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		_ When		Case number, if	known
11.	Do you rent your	□ No	. Go to lii	ne 12.				
	residence?	■ Ye	5.	ur landlord obtained an evicti No. Go to line 12.	ion judgme	ent against you?		
			_	Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About ar	Eviction Judgme	nt Against You (Form	101A) and file it with this

	otor 1 Scott Michael Lon Nancy Diana Long			Case number (if known)			
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propri	etor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bu	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	y			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code			
	it to this petition.		Check the appropriate b	oox to describe your business:			
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as)	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broken	ser (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abo	ve			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Cha	apter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	,			Number, Street, City, State & Zip Code			

Debtor 1 Scott Michael Long Debtor 2 **Nancy Diana Long** 

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. 

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 2 Nancy Diana Long				Case num	nber (if known)	
Par	t 6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consuindividual primarily for a personal			defined in 11 U.S.C. § 101(8) a	s "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe t	that are not consum	ner debts or busi	ness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available				strative expenses
	are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000	
	you estimate that you owe?	□ 50-99		<u> </u>		<u> </u>	
□ 100-199 □ 200-999				□ 10,001-25,00	00	☐ More than100,000	
19.	How much do you	<b>\$0 - \$</b>	50 000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1	billion
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001	- \$50 million	<b>1</b> \$1,000,000,001 - \$	S10 billion
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - ☐ More than \$50 billi	
		<b>L</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,00	- Ψοσο πιιιισπ	— Wore than \$60 billi	
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 -		□ \$500,000,001 - \$1	
	to be?		001 - \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - □ \$10,000,000,001	
			001 - \$500,000 001 - \$1 million	□ \$30,000,001 □ \$100,000,00		☐ More than \$50 bill	
			·				
Par	7: Sign Below						
For	you	I have ex	camined this petition, and I declare	under penalty of p	erjury that the inf	formation provided is true and o	correct.
			chosen to file under Chapter 7, I at tates Code. I understand the relief				
			rney represents me and I did not p nt, I have obtained and read the no				out this
		I request	relief in accordance with the chap	ter of title 11, Unite	d States Code, s	specified in this petition.	
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, and 3571.						
			t Michael Long		/s/ Nancy Diag		
			lichael Long e of Debtor 1		Nancy Diana Signature of De		
		Executed	d on April 25, 2019		Executed on	April 25, 2019	
			MM / DD / YYYY			MM / DD / YYYY	

Debtor 1 Scott Micha Debtor 2 Nancy Diar	•	Case number (if known)				
For your attorney, if your represented by one	under Chapter 7, 11, 12, or 13 of title 11,	this petition, declare that I have informed the debtor(s) about eligibility to proceed United States Code, and have explained the relief available under each chapter tify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b)				
If you are not represent an attorney, you do not to file this page.		and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.				
pugu	/s/ Carla M. Handy	Date <b>April 25, 2019</b>				
	Signature of Attorney for Debtor	MM / DD / YYYY				
	Carla M. Handy Printed name					
	Bond, Botes & Handy, P.C.					
	219 South 4th. Street					
	Gadsden, AL 35901-4213					
	Number, Street, City, State & ZIP Code					
	Contact phone <b>256-485-0195</b>	Email address btaylor@bondandbotes.com				

ASB-2883-a31c AL Bar number & State

	in this information to identify your case:		
Del	btor 1 Scott Michael Long		
٥.	First Name Middle Name Last Name		
Deb	otor 2 Nancy Diana Long		
(Spo	ouse if, filing) First Name Middle Name Last Name		
Uni	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ALABAMA, EASTERN DIVISION		
Car			
	se number	☐ Checl	c if this is an
		amen	ded filing
Su Be a info you	ficial Form 106Sum  Immary of Your Assets and Liabilities and Certain Statistical Information  as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new Summary and check the box at the top of this page.	r supplyir	
Pai	Summarize rour Assets	Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,539.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	18,539.00
Par	rt 2: Summarize Your Liabilities		
2	Schoolula Di Craditara Wha Haya Claima Sequrad by Pranarty (Official Form 105D)		<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	970.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		
	od. Copy the total damb from Late (phonty discourse diamb) from the Co of Concedit 27	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ \$	
		· <del></del>	
Par	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	· <del></del>	137,645.00 138,615.00
Par 4.	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  Your total liabilities	· <del></del>	137,645.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  Your total liabilities  Summarize Your Income and Expenses  Schedule I: Your Income (Official Form 106l)	\$	137,645.00 138,615.00 4,368.34
4. 5.	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  Your total liabilities  Schedule I: Your Income (Official Form 106l) Copy your combined monthly income from line 12 of Schedule I  Schedule J: Your Expenses (Official Form 106J)	\$	137,645.00
4. 5. Par	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	137,645.00 138,615.00 4,368.34
4. 5.	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$ \$	137,645.00 138,615.00 4,368.34 4,268.00
4. 5. Par	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$ \$	137,645.00 138,615.00 4,368.34 4,268.00

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Case 19-40701-JJR7

Official Form 106Sum

the court with your other schedules.

page 1 of 2
Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1	Scott Michael Long
Debtor 2	Nancy Diana Long

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,760.95

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	42,477.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	42,477.00

Fill in	this informati	ion to identify your case	and this filing:		
Debtor	r 1	Scott Michael Long			
_ 00.0.		First Name	Middle Name Last Name		
Debtor	r 2	Nancy Diana Long			
(Spouse	, if filing)	First Name	Middle Name Last Name		
United	States Bankri	uptcy Court for the: NOR	THERN DISTRICT OF ALABAMA, EASTERN DIVISI	NC	
Case r	number				☐ Check if this is an amended filing
Offic	cial Form	n 106A/B			g .
Sch	redule	A/B: Propert	V		12/15
			s. List an asset only once. If an asset fits in more than or		
Part 2: Do you someon	Describe You  nown, lease, one else drives.  s, vans, truck	e property? or Vehicles or have legal or equitable	est in any residence, building, land, or similar property?  e interest in any vehicles, whether they are registed or report it on Schedule G: Executory Contracts and Unehicles, motorcycles		chicles you own that
	Make: Jee	p and Cherokee	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured clause the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
	Year: 200		Debtor 2 only		
	Approximate mi	leage: 159000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information	on:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00
	Model: Tra	evrolet ilBlazer	Who has an interest in the property? Check one  Debtor 1 only	Do not deduct secured clause the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
	Year: <b>200</b>		Debtor 2 only	Current value of the	Current value of the
	Approximate mi		Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other information	on:	☐ At least one of the debtors and another		
			Check if this is community property	\$3,989.00	\$3,989.00

Official Form 106A/B Schedule A/B: Property page 1

Debtoi Debtoi		Scott Michae Iancy Diana			Case num	ber (if known)	
		Honda Accord 2005 mate mileage: formation:	188000	Who has an interest in the property? Check  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	the Cri	amount of any secur	claims or exemptions. Put ed claims on Schedule D: ilms Secured by Property. Current value of the portion you own?
				Check if this is community property (see instructions)	_	\$4,770.00	\$4,770.00
Exar ■ N □ Y	mples: E lo es d the do	Boats, trailers,	motors, personal wa	nd other recreational vehicles, other vehiclercraft, fishing vessels, snowmobiles, mot	orcycle accesso	es for	\$11,759.00
Part 3:	•		nal and Household It				
				terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	amples: No	goods and f Major appliar escribe	urnishings nces, furniture, linens	, china, kitchenware			
			Household goo	ds and furnishings			\$2,000.00
			Dresser; mirror	; queen size bed, rails and headboa	ırd		\$500.00
Exa	No	Televisions a		eo, stereo, and digital equipment; compute nedia players, games	rs, printers, scan	ners; music collect	ions; electronic devices
			Personal electron	onics			\$1,000.00
Exa	amples: No		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or llectibles	other art objects	; stamp, coin, or ba	aseball card collections;
			Collectibles				\$250.00
Exa	amples: No	for sports and Sports, photo musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool ta	ables, golf clubs,	skis; canoes and k	ayaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property page 2

Debt Debt		Nancy Diana			Case number (if known	n)
10 <b>F</b>	irearn				<u> </u>	
	Examp		shotgur	ns, ammunition, and r	related equipment	
	l No					
	Yes.	Describe				
			Firear	ms		\$200.00
					· · · · · · · · · · · · · · · · · · ·	
	Clothe					
_	<i>Examp</i> ] No	oles: Everyday clot	hes, fur	s, leather coats, desig	gner wear, shoes, accessories	
	_	Describe				
		<u> </u>	Clothi	ng		\$200.00
	lewelr		alry cos	stume jewelry engage	ement rings, wedding rings, heirloom jewelry, watches, gems.	gold silver
	l No	oles. Everyday jew	ciry, coc	starrie jewerry, erigage	ement rings, wedding rings, nemoorn jeweny, wateries, gerns,	goid, silver
	Yes.	Describe				
		Г				<b>\$450.00</b>
			Jeweli	ry		\$150.00
		i <b>rm animals</b> ples: Dogs, cats, bi	rds. hor	ses		
	No No	= 190, 1000, 10	,			
	l Yes.	Describe				
14. <b>A</b>	Anv ot	her personal and	housel	nold items vou did n	ot already list, including any health aids you did not list	
	No			,	,,,,,,,, .	
	l Yes.	Give specific info	rmation.			
15.			•		rt 3, including any entries for pages you have attached	\$4,300.00
	tor Pa	art 3. Write that n	umber I	nere	······································	Ψ+,500.00
_	_					
		scribe Your Financi			any of the following?	Current value of the
БО у	ou ow	vii or nave any le	gai or e	quitable interest in a	any of the following?	portion you own?
						Do not deduct secured claims or exemptions.
						ciains of exemptions.
16. <b>C</b>		ples: Money you ha	ave in vo	our wallet, in your hom	ne, in a safe deposit box, and on hand when you file your pet	ition
_	l No	, ,	,	· · · · · · · · · · · · · · · · · ·	,	
	Yes					
					Cash	\$10.00
					Casii	\$10.00
47 F	)anaa:	ita af manay				
		its of money ples: Checking, sav	vings, or	r other financial accou	unts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
_	1	institutions. If	you hav	ve multiple accounts v	with the same institution, list each.	
	No Voc				Institution name:	
	res					
			17.1.	Checking	BBVA Compass	\$34.00
					<u> </u>	
			17.2.	Savings	BBVA Compass	\$1,801.00

Filed 04/26/19 Entered 04/26/19 14:47:37 Desc Main Case 19-40701-JJR7 Doc 1 Page 12 of 60 Document

Schedule A/B: Property

Official Form 106A/B

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page 3

Best Case Bankruptcy

Case number (if known)

BBVA Compass

17.3.	Checking	Son's account with both debtors on account

\$435.00

18	Bonds, mutual funds, or publicly traded stocks		
	Examples: Bond funds, investment accounts with bro	kerage firms, money market accounts	
	■ No		
	☐ Yes Institution or issuer r	name:	
19	Non-publicly traded stock and interests in incorpo joint venture	prated and unincorporated businesses, including an interest in a	an LLC, partnership, and
	■ No		
	☐ Yes. Give specific information about them	 % of ownership:	
20	Government and corporate bonds and other nego Negotiable instruments include personal checks, cas Non-negotiable instruments are those you cannot tra	hiers' checks, promissory notes, and money orders.	
	Yes. Give specific information about them Issuer name:		
21	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 4  ■ No  □ Yes. List each account separately.  Type of account:	03(b), thrift savings accounts, or other pension or profit-sharing plans Institution name:	s
22	Examples: Agreements with landlords, prepaid rent, p  No	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies,	or others
	☐ Yes	institution hame of individual.	
23	Annuities (A contract for a periodic payment of mone  ■ No	ey to you, either for life or for a number of years)	
	Yes Issuer name and description.		
24	Interests in an education IRA, in an account in a que 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition prograi	n.
	· · · ·	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	Trusts, equitable or future interests in property (or ■ No □ Yes. Give specific information about them	ther than anything listed in line 1), and rights or powers exercis	able for your benefit
26	Patents, copyrights, trademarks, trade secrets, an Examples: Internet domain names, websites, proceed No □ Yes. Give specific information about them	• • •	
27	Licenses, franchises, and other general intangible	es erative association holdings, liquor licenses, professional licenses	
	= 100. One opeome information about them		
M	oney or property owed to you?		Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

	ebtor 1 ebtor 2	Scott Michael Long Nancy Diana Long	Case number (if known)	
28.	Tax ref	unds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already file	ed the returns and the tax years	
	Examp ■ No	support oles: Past due or lump sum alimony, spousal support, child support, mai	intenance, divorce settlement, property se	ttlement
	Examp	amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability benefits, si benefits; unpaid loans you made to someone else  Give specific information	ck pay, vacation pay, workers' compensa	ation, Social Security
	Interes	ts in insurance policies		
	Examp ☐ No	oles: Health, disability, or life insurance; health savings account (HSA); of	credit, homeowner's, or renter's insurance	•
	Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Cigna Term Life through employer \$100,000 DEATH BENEFIT	Nancy Long	\$0.00
	If you a someo	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died.  Give specific information	e policy, or are currently entitled to receive	e property because
	Examp ■ No	against third parties, whether or not you have filed a lawsuit or maples: Accidents, employment disputes, insurance claims, or rights to sue		
		contingent and unliquidated claims of every nature, including coun	starolaima of the debtor and rights to see	at off alaima
	■ No	contingent and uniquidated claims of every nature, including coun	nterclaims of the debtor and rights to se	et on ciainis
	☐ Yes.	Describe each claim		
	Any fin ■ No	nancial assets you did not already list		
	☐ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including any entrart 4. Write that number here		\$2,280.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List a	any real estate in Part 1.	
		own or have any legal or equitable interest in any business-related property to Part 6.	?	
	_	Go to line 38.		
				Current value of the

portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 5

	otor 1 otor 2	Scott Michael Long Nancy Diana Long	Case number (if known)	
38.	Accou	nts receivable or commissions you already earned		
_	No			
L	┛Yes.	Describe		
	<i>Exam</i> µ ⊒ No -	equipment, furnishings, and supplies ples: Business-related computers, software, modems, printers, copiers, fax Describe	machines, rugs, telephones, desks, chairs, ele	ctronic devices
		Office equipment		\$200.00
40	NA I- !		to-de-	
_	Macnir ■ No	nery, fixtures, equipment, supplies you use in business, and tools of	our trade	
_	_	Describe		
41.	Invento	ory		
	No			
	☐ Yes.	Describe		
_	Interes ■ No	sts in partnerships or joint ventures		
		Give specific information about them		
_		Name of entity:	% of ownership:	
43.	Custor	mer lists, mailing lists, or other compilations		
	No.			
	Do you	ur lists include personally identifiable information (as defined in 11 U.S.C. § 101	(41A))?	
		_		
		■ No		
	ı	☐ Yes. Describe		
44	Anv bu	usiness-related property you did not already list		
	No No	admost rolated property you are not already not		
	☐ Yes.	Give specific information		
15	۸ dd t	the dollar value of all of your entries from Part 5, including any entries	s for names you have attached	
45.		art 5. Write that number here		\$200.00
	_			
Part		escribe Any Farm- and Commercial Fishing-Related Property You Own or Have a rou own or have an interest in farmland, list it in Part 1.	an Interest In.	
46	Do νοι	ມ own or have any legal or equitable interest in any farm- or commerc	ial fishing-related property?	
<del>-</del> 0.	-	Go to Part 7.	ial norming related property.	
	☐ Yes	s. Go to line 47.		
Part	7:	Describe All Property You Own or Have an Interest in That You Did Not List	Above	
53.	Do you	ı have other property of any kind you did not already list?		
	Examp	ples: Season tickets, country club membership		
	■ No	Give specific information		
	<b>-</b> 165.	Oivo specific illiorifiation		

Official Form 106A/B Schedule A/B: Property page 6

	tor 1 tor 2	Scott Michael Long Nancy Diana Long			Case number (if known)	
54.	Add ti	he dollar value of all of your entries from Part 7. Writ	e tha	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$0.00
56.	Part 2	2: Total vehicles, line 5		\$11,759.00	_	
57.	Part 3	3: Total personal and household items, line 15		\$4,300.00		
58.	Part 4	l: Total financial assets, line 36		\$2,280.00		
59.	Part 5	5: Total business-related property, line 45		\$200.00		
60.	Part 6	3: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7	: Total other property not listed, line 54	+	\$0.00		
62.	Total	personal property. Add lines 56 through 61		\$18,539.00	Copy personal property total	\$18,539.00

Official Form 106A/B Schedule A/B: Property page 7

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$18,539.00

Fill in this inform	ation to identify your	case:				
Debtor 1	Scott Michael Lo	ng Middle Name	Last Name			
Debtor 2	Nancy Diana Lon		<u> </u>			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA, EASTERN DIVISI	ON		
Case number(if known)					☐ Chec	k if this is an
					amen	nded filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming?	Check one only.	even if your spouse	e is tilina	with voil.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
\$3,000.00		\$2,000.00	Ala. Code §§ 6-10-6, 6-10-1
		100% of fair market value, up to any applicable statutory limit	
\$3,989.00		\$3,402.99	Ala. Code §§ 6-10-6, 6-10-1
		100% of fair market value, up to any applicable statutory limit	
\$4,770.00		\$4,000.00	Ala. Code §§ 6-10-6, 6-10-1
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	Ala. Code §§ 6-10-6, 6-10-1
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	Ala. Code §§ 6-10-6, 6-10-1
		100% of fair market value, up to any applicable statutory limit	
	\$3,989.00 \$4,770.00	\$3,989.00	Copy the value from Schedule A/B  \$3,000.00  \$2,000.00  100% of fair market value, up to any applicable statutory limit  \$4,770.00  \$4,000.00  100% of fair market value, up to any applicable statutory limit  \$2,000.00  \$1,000.00  \$1,000.00  \$1,000.00  100% of fair market value, up to any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1 Debtor 2 Scott Michae Nancy Diana	•			Case number (if known)	
Brief description of the Schedule A/B that lists	Brief description of the property and line on Schedule A/B that lists this property			Current value of the Amount of the exemption you claim portion you own	
	6. 040	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Collectibles Line from Schedule A	/p. <b>9 1</b>	\$250.00		\$250.00	Ala. Code §§ 6-10-6, 6-10-12
Line Hom Schedule A	D. <b>0. 1</b>			100% of fair market value, up to any applicable statutory limit	
Firearms Line from Schedule A	/R· 10 1	\$200.00		\$200.00	Ala. Code §§ 6-10-6, 6-10-12
Line Holl Schedule A	<i>D.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
Clothing	/D: <b>11 1</b>	\$200.00		\$200.00	Ala. Code §§ 6-10-6, 6-10-126
Line nom schedule A	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A	/p. 12 1	\$150.00		\$150.00	Ala. Code §§ 6-10-6, 6-10-12
Line Horr Scriedule A	/D. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A	/R· 16 1	\$10.00		\$10.00	Ala. Code §§ 6-10-6, 6-10-12
Line nom denedate A	<i>D.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
Checking: BBVA (	•	\$34.00		\$34.00	Ala. Code §§ 6-10-6, 6-10-12
Line nom denedate A	<i>Б.</i> • • • • • • • • • • • • • • • • • • •			100% of fair market value, up to any applicable statutory limit	
Savings: BBVA Co		\$1,801.00		\$1,801.00	Ala. Code §§ 6-10-6, 6-10-12
Line Holl Schedule A	D. 11.2			100% of fair market value, up to any applicable statutory limit	
Checking: BBVA (	•	\$435.00		\$435.00	Ala. Code §§ 6-10-6, 6-10-12
account Line from Schedule A				100% of fair market value, up to any applicable statutory limit	
Office equipment	/D 20.4	\$200.00		\$200.00	Ala. Code §§ 6-10-6, 6-10-12
Line from Schedule A	<sup>,</sup> D. <b>39. l</b>			100% of fair market value, up to any applicable statutory limit	
■ No	t on 4/01/22 and every	3 years after that for ca	ases fi	led on or after the date of adjustmer	

Official Form 106C

☐ Yes

	n this information	to identify yοι	r case:			
Debt	or 1 Sco	ott Michael L	ong			
Dobi		Name	Middle Name Last Name			
Debt	or 2 Nai	ncy Diana Lo	na			
(Spou	se if, filing) First		Middle Name Last Name			
Unite	ed States Bankrupto	y Court for the:	NORTHERN DISTRICT OF ALABAMA, EAS	TERN DIVISION		
Case	e number					
(if kno	· · · · · <u> </u>				☐ Check	if this is an
					ameno	led filing
Offi	cial Form 106	SD.				
Scl	nedule D: C	reditors	Who Have Claims Secured	by Propert	у	12/15
is nee			If two married people are filing together, both are eq out, number the entries, and attach it to this form. Or			
1. Do	any creditors have cl	aims secured by	your property?			
	☐ No. Check this bo	x and submit t	nis form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
ı	Yes. Fill in all of t	he information	below.			
Part	1: List All Secu	red Claims				
for ea	ach claim. If more than	one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	W.S. Badcock C	orp.	Describe the property that secures the claim:	\$970.00	\$500.00	\$470.00
	Creditor's Name		Dresser; mirror; queen size bed, rails and headboard			
	P.O. Box 232 Mulberry, FL 33	860	As of the date you file, the claim is: Check all that apply.			
	Number, Street, City, Sta	te & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	owes the debt? Che	eck one.	Nature of lien. Check all that apply.			
<b>■</b> D	ebtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
	ebtor 2 only		car loan)			
ЦD	ebtor 1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	t least one of the debto	rs and another	☐ Judgment lien from a lawsuit			
□ D			Other (including a right to offset) Purchase N	Money Security		
□ D □ A	heck if this claim rela community debt	ites to a	Other (including a right to onset)			
			Last 4 digits of account number 3096			
	community debt					
D A	debt was incurred	11/2017		\$97	70.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in this info	rmation to identify your case:			
Debtor 1	Scott Michael Long			$\neg$
		ddle Name Last Name		
Debtor 2	Nancy Diana Long			
(Spouse if, filing)		ddle Name Last Name		
United States B	ankruptcy Court for the: NORTH	HERN DISTRICT OF ALABAMA, EAS	STERN DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official For				_
Schedule I	E/F: Creditors Who Ha	ive Unsecured Claims		12/15
Schedule D: Cred left. Attach the Co name and case no	itors Who Have Claims Secured by Prontinuation Page to this page. If you h	ave no information to report in a Part,	the Part you need, fill it o	ut, number the entries in the boxes on the ne top of any additional pages, write your
	tors have priority unsecured claims a			
No. Go to	. ,	igamst you.		
Yes.	rait 2.			
	All of Your NONPRIORITY Unsec	ured Claims		
	tors have nonpriority unsecured clair			
		t this form to the court with your other sch	adulas	
_	ave nothing to report in this part. Submit	t this form to the court with your other son	sudios.	
Yes.				
unsecured cla	aim, list the creditor separately for each	e alphabetical order of the creditor who claim. For each claim listed, identify what t er creditors in Part 3.If you have more than	type of claim it is. Do not list	t claims already included in Part 1. If more
ranz.				Total claim
	nesia Associates, PA	Last 4 digits of account number	0365	\$102.00
•	ity Creditor's Name  ox 8305	When was the debt incurred?	11/2018	
	len, AL 35902	when was the debt incurred:	11/2010	
	Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who inc	urred the debt? Check one.			
Debto	or 1 only	☐ Contingent		
☐ Debto	or 2 only	☐ Unliquidated		
	or 1 and Debtor 2 only	Disputed		
	ast one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Chec	k if this claim is for a community	☐ Student loans	· P	- 464
	aim subject to offset?	Obligations arising out of a separeport as priority claims	iration agreement or divorc	e tnat you did not
■ No	-	☐ Debts to pension or profit-sharin	g plans, and other similar	debts
Пуеѕ		Other Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Debtor Debtor	1 Scott Michael Long 2 Nancy Diana Long		Case number (if known)	
4.2	APP of Alabama ED PLLC	Last 4 digits of account number	_0081	\$226.00
	Nonpriority Creditor's Name P.O. Box 4458 Dept 175 Houston, TX 77210-4458	When was the debt incurred?	07/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	App of Alabama ED PLLC Nonpriority Creditor's Name	Last 4 digits of account number	7093	\$116.00
	c/o Wakefield & Associates P.O. Box 50250	When was the debt incurred?	11/2018	
	Knoxville, TN 37950-0250  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.4	Barclays Bank Delaware	Last 4 digits of account number	5566	\$4,810.00
	Nonpriority Creditor's Name Attn: Correspondence P.O. Box 8801	When was the debt incurred?	Opened 07/13	
	Wilmington, DE 19899			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
		·		
	Yes	Other. Specify Credit Card	, and a second s	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	2086	\$4,304.00
Attn: Correspondence P.O. Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 07/13	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
<ul><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card		
Capital One	Last 4 digits of account number	3220	\$4,258.00
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 30285	When was the debt incurred?	Opened 11/15	
Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	i claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Capital One	Last 4 digits of account number	0216	\$962.00
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 30285	When was the debt incurred?	Opened 08/11	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	I claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
.10	■ Other. Specify Credit Card		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 11

Clinical Urology Associates	Last 4 digits of account number	3272	\$414.00
Nonpriority Creditor's Name	Last 4 digits of account number	3212	<b>Ψ414.0</b> 0
713 Goodyear Avenue Gadsden, AL 35903	When was the debt incurred?	11/2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Medical		
Creditors Bureau Association	Last 4 digits of account number	1467	\$620.00
Nonpriority Creditor's Name Attn: Bankruptcy 112 Ward St	When was the debt incurred?	Opened 12/03/18	
Macon, GA 31201  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only			
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u Claiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
■ Yes	Other. Specify Medical	g plans, and other similar debts	
Dekalb Ambulance Service Nonpriority Creditor's Name	Last 4 digits of account number	7306	\$620.00
P.O. Box 680643 Fort Payne, AL 35968	When was the debt incurred?	7/2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Nancy Diana Long		Case number (if known)	
DeKalb Radiology Group LLC	Last 4 digits of account number	7872	\$15.0
Nonpriority Creditor's Name P.O. Box 11407 Birmingham, AL 35246	When was the debt incurred?	11/2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Medical		
DeKalb Regional Medical Center	Last 4 digits of account number	4445	\$31.0
Nonpriority Creditor's Name  200 Medical Center Drive SW	When was the debt incurred?	11/2018	
Fort Payne, AL 35968  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
_	<u> </u>		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans	a Graini.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other Specify Medical		
Codedon Pegional Medical Center		0823	\$224.0
Nonpriority Creditor's Name P.O. Box 404799	Last 4 digits of account number  When was the debt incurred?	07/2018	<b>\$224.</b> (
Atlanta, GA 30384-4799  Number Street City State Zip Code	As of the date you file, the claim		
Who incurred the debt? Check one.	As of the date you me, the claim	is. Officer all that apply	
□ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Nancy Diana Long		Case number (if known)	
Gadsden Regional Medical Center	Last 4 digits of account number	2336	\$3.0
Nonpriority Creditor's Name P.O. Box 14000 Polifort ME 04015	When was the debt incurred?	11/2018	
Belfast, ME 04915  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • •		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Gadsden Regional Medical Center	Last 4 digits of account number	9915	\$978.00
Nonpriority Creditor's Name	Last 4 digits of account number		<b>40.0.0</b>
c/o PASI	When was the debt incurred?	11/2018	
P.O. Box 188			
Brentwood, TN 37024  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0. 1.10 uu.0 youo, 1.10 o.u	or chook all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Hemant K. Sinha PC	Last 4 digits of account number	A000	\$109.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ100.0
P.O. Box 7027	When was the debt incurred?	7/2018	
Rainbow City, AL 35906-7027  Number Street City State Zip Code	. As as the date were sile the element		
Who incurred the debt? Check one.	As of the date you file, the claim i	ъ. Спеск ан тат арргу	
Debtor 1 only	☐ Contingent		
Debtor 2 only			
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	<del></del>	
☐ Check if this claim is for a community debt sthe claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
		· · · · · · · · · · · · · · · · · · ·	

Schedule E/F: Creditors Who Have Unsecured Claims

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Nancy Diana Long		Case number (if known)	
MOHELA/Debt of Ed	Last 4 digits of account number	0002	\$42,477.0
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 07/11	
633 Spirit Dr Chesterfield, MO 63005 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	$\square$ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
Northeast Imaging	Last 4 digits of account number	2033	\$20.0
Nonpriority Creditor's Name P.O. Box 11407 Birmingham, AL 35246-0910	When was the debt incurred?	07/2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	$\square$ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Northeast Imaging	Last 4 digits of account number	6271	\$4.0
Nonpriority Creditor's Name P.O. Box 11407	When was the debt incurred?	11/2018	·
Birmingham, AL 35246-0910  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Nancy Diana Long		Case number (if known)	
OneMain Financial	Last 4 digits of account number	2520	\$5,639.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 07/16	
601 Nw 2nd Street Evansville. IN 47708			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Signature L	oan	
Quest Diagnostic	Last 4 digits of account number	9701	\$101.00
Nonpriority Creditor's Name P.O. Box 7306	When was the debt incurred?	11/2018	<u>-</u>
Hollister, MO 65673	=		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
_	По и		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	a Ciaiiii.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical		
Donid Core Inc. ALD		6581	\$44.00
Rapid Care Inc., ALB Nonpriority Creditor's Name	Last 4 digits of account number	0301	\$44.00
9511 US Hwy 431 Albertville, AL 35950-0128	When was the debt incurred?	10/2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
is the claim subject to onset?			
■ No	Debts to pension or profit-sharing	a plane, and other cimilar dobte	

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Nancy Diana Long		Case number (if known)	
Redstone Federal Credit Union	Last 4 digits of account number	0487	\$2,258.0
Nonpriority Creditor's Name c/o Howard Grisham P.O. Box 5585 Huntsville, AL 35814	When was the debt incurred?	6/5/2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Pending Ju		
Yes	Other. Specify Credit Care	d Acct. # 4271210010025848	
Regions	Last 4 digits of account number	9173	\$45,080.
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	10/2015	
P.O. Box 18001 Hattiesburg, MS 39404-8001			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Property	Deficiency on Residential	
Target	Last 4 digits of account number	7326	\$462.
Nonpriority Creditor's Name			*
Attn: Bankruptcy P.O. Box 9475	When was the debt incurred?	Opened 05/10	
Minneapolis, MN 55440  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 07 11.0 44.0 704 11.0, 11.0 014.11.1	io chock an unit apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Credit Card	i	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor Debtor	1 Scott Michael Long 2 Nancy Diana Long		Case number (if known)	
	- Ivancy Diana Long		- Case Harrison (ii kilowii)	
4.2 6	Webbank Serviced By Lending Clu Nonpriority Creditor's Name	Last 4 digits of account number	0189	\$15,168.00
	c/o JH Portfolio Debt Equities, LLC 5757 Phantom Dr. Ste 225	When was the debt incurred?	Opened 06/18	
	Hazelwood, MO 63042 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other. Specify Installment		
	_ 155	Other. Specify		
4.2	Wilson & Shelton, LLC	Last 4 digits of account number	3096	\$8,600.00
<u>·</u> .	Nonpriority Creditor's Name P.O. Box 492	_	6/2047	<u> </u>
	Rainsville, AL 35986  Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	6/2017 is: Check all that apply	
	Who incurred the debt? Check one.	,	, and a pp. 7	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plane and other circilar debte	
	■ No □ Yes	·	· ·	
	Li Yes	Other. Specify Attorney F	<del>ees</del>	
Part 3:	List Others to Be Notified About a De	eht That You Already Listed		
5. Use th is tryir have r	is page only if you have others to be notified ng to collect from you for a debt you owe to some than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that someone else, list the original creditor in lat you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	nd Address f Alabama ED PLLC	On which entry in Part 1 or Part 2 did you Line <b>4.3</b> of ( <i>Check one</i> ):	list the original creditor?  Part 1: Creditors with Priority Unsecured Clair	
	ox 4458 Dept 175		Part 1: Creditors with Phonty Onsecured Clair  Part 2: Creditors with Nonpriority Unsecured (	
Houst	on, TX 77210-4458	Last 4 digits of account number	0005	Siaiiiis
	nd Address o Ambulance Service	On which entry in Part 1 or Part 2 did you Line <b>4.10</b> of ( <i>Check one</i> ):	list the original creditor?  Part 1: Creditors with Priority Unsecured Clair	
	editors Bureau Associates of		Part 1: Creditors with Phonty Onsecured Clair  Part 2: Creditors with Nonpriority Unsecured (	
GA 112 W	ard St.	_	- Part 2. Creditors with Nonpholity offsecured C	Sidillis
	n, GA 31204			
		Last 4 digits of account number	0859	
	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	rtfolio Debt Equities, LLC		Part 1: Creditors with Priority Unsecured Clair	
P.O. B	ott & Associates PC ox 115220		Part 2: Creditors with Nonpriority Unsecured 0	Claims
Carrol	Iton, TX 75011-5220	Last 4 digits of account number		

106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Official Form 106 E/F

Debtor 1 Scott Michael Long Nancy Diana Long		Case number (if known)  8500	
Name and Address	On which entry in Part 1 or Part 2 or	id you list the original creditor?	
Lending Club	Line 4.26 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
71 Stevenson St., Ste. 300 San Francisco, CA 94105		Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	9843	

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Tot	al Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	Tot	al Claim 42,477.00
Total claims					,
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	95,168.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	137,645.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Scott Michael Lo	ng			
	First Name	Middle Name	Last Name		
Debtor 2	Nancy Diana Lon	g			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA, EASTERN DIVISION	_	
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del></del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this i	information to identify your cas	se:			
Debtor 1	Scott Michael Long				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Nancy Diana Long First Name	Middle Name	Last Name		
	<i>5,</i>		OF ALABAMA, EASTER	RN DIVISION	
0 1	_				
Case numb					☐ Check if this is an amended filing
Official	Form 106H				
		-1			
Schea	ule H: Your Codel	otors			12/15
ill it out, an	nd number the entries in the bo and case number (if known). A you have any codebtors? (If you	xes on the left. Attach	the Additional Page to	this page. On the top o	ded, copy the Additional Page, of any Additional Pages, write
′	• , ,	,	·		
■ No □ Yes					
Arizona  No. (	in the last 8 years, have you live, California, Idaho, Louisiana, Ne Go to line 3.  Did your spouse, former spouse	evada, New Mexico, Pu	erto Rico, Texas, Washir		tates and territories include
in line Form 1 out Co	2 again as a codebtor only if th 106D), Schedule E/F (Official Fo Jumn 2.	at person is a guaran	tor or cosigner. Make s	ure you have listed the 6G). Use Schedule D, Sc	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and ZIP C	ode		Check all schedules	tor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	·
	Number Street			-	
C	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, line	<del></del>
				☐ Schedule G, line	
N	Number Street			-	
C	City	State	ZIP Code		

Fill in this information	to identify your case:	
Debtor 1	Scott Michael Long	
Debtor 2 (Spouse, if filing)	Nancy Diana Long	
United States Bankru	ptcy Court for the: NORTHERN DISTRICT OF ALABAMA, EASTERN DIVISION	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form		13 income as of the following date:  MM / DD/ YYYY
Schedule I:	Your Income	12/1

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Equipment Operator Customer Service** Include part-time, seasonal, or **Employer's name The Childrens Place Backwoods Velocity** self-employed work. **Employer's address** Occupation may include student 1377 Airport Road W. 25813 Hwy KK or homemaker, if it applies. Fort Payne, AL 35967 Mexico, MO 65265 How long employed there? 9 years 4 months 2.5 years

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Deptor 1		filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	3,213.17	\$	1,954.68
3.	Estimate and list monthly overtime pay.	3.	+\$	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	3,213.17	\$_	1,954.68

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

5a. Tax, Medicare, and Social Security deductions   5a. \$ 429.00 \$ 0.00					For I	Debtor 1		ebtor 2 or	
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5a. Mandatory contributions for retirement plans  5b. \$ 0.00 \$ 0.00  5c. Voluntary contributions for retirement plans  5c. \$ 0.00 \$ 0.00  5c. Voluntary contributions for retirement plans  5d. \$ 0.00 \$ 0.00  5d. Required repayments of retirement trunt loans  5d. \$ 0.00 \$ 0.00  5d. Required repayments of retirement fund loans  5d. \$ 0.00 \$ 0.00  5d. Domestic support obligations  5f. \$ 0.00 \$ 0.00  5g. \$ 0.00  5g. \$ 0.00 \$ 0.00  5g. \$		Copy	/ line 4 here	4.	\$	3 213 17			
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.00 \$ 0.00  5d. Required repayments of retirement tund loans 5d. \$ 0.00 \$ 0.00  5d. Insurance 5d. S 288.17 \$ 0.00  5d. Insurance 5d. S 0.00 \$ 0.00  5d. Other deductions. Specify: Accident Insurance 5d. S 0.00 \$ 0.00  5d. Other deductions. Specify: Accident Insurance 5d. S 0.00 \$ 0.00  5d. Other deductions. Specify: Accident Insurance 5d. Sauth S 0.00 \$ 0.00  5d. Other deductions. Specify: Accident Insurance 5d. S 0.00 \$ 0.00  5d. Other deductions. Specify: Accident Insurance 5d. Add the payroll deductions. Add line 5a+Bb-5c+6d+6e+6l+5g+5g+6h. 6d. \$ 799.51 \$ 0.00  7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,413.66 \$ 1,954.68  8d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly ret income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive settlement, and property settlement.  8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00  8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (in known) of any non-cost assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  9g. Pension or retirement income 8h. Other monthly income. Add line 7 + line 9.  Add the entires in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  10. Calculate monthly income. Add line 7 + line 9.  Add the amount in the last column of line 10		COPY	,	••	Ψ	3,213.17	Ψ	1,334.00	
55. Mandatory contributions for retirement plans 56. Voluntary contributions for retirement plans 57. Voluntary contributions for retirement plans 58. Required repayments of retirement fund loans 58. Required repayments of retirement fund loans 59. Domestic support obligations 59. Domestic support obligations 59. Union dues 59. Solution des 59. Solution 59. Solution 59. One 59. Union dues 59. Domestic support obligations 59. One deductions. Specify: Accident Insurance 59. Solution 69. Solution 59. Solution 59. Solution 69. Solution	5.	List a	all payroll deductions:						
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56. Required repayments of retriement fund loans 56. Insurance 56. Domestic support obligations 56. Insurance 57. Other deductions. Specify: Accident Insurance 58. Union dues 59. Supplemental Life Insurance 50. Supplemental Supplemental Supplemental Numinon Assistance Life Insurance Life		5c.		5c.	\$		\$		
56.   Insurance   56.   \$ 288.17   \$ 0.00   57.   Domestic support obligations   57.   \$ 0.00   \$ 0.00   58.   Union dues   59.   \$ 0.00   \$ 0.00   59.   Supplemental Life Insurance   59.   \$ 34.67   \$ 0.00   59.   Supplemental Life Insurance   \$ 15.17   \$ 0.00   59.   Supplemental Life Insurance   \$ 15.17   \$ 0.00   59.   Calculate total monthly take-home pay. Subtract line 6 from line 4.   7.   \$ 2,413.66   \$ 1,954.68   59.   Calculate total monthly take-home pay. Subtract line 6 from line 4.   7.   \$ 2,413.66   \$ 1,954.68   59.   Nationer from rental property and from operating a business, profession, or farm   Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   8a.   \$ 0.00   \$ 0.00   50.   Interest and dividends   8a.   \$ 0.00   \$ 0.00   50.   Interest and dividends   8a.   \$ 0.00   \$ 0.00   50.   Interest and property settlement.   8c.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.   \$ 0.00   \$ 0.00   50.   Supplemental Life Insurance   8a.		5d.	·		\$		\$		
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59. Union dues  50. Other deductions. Specify: Accident Insurance  50. Supplemental Life Insurance  60. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  60. Supplemental Life Insurance  61. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  62. Supplemental Life Insurance  63. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  63. Supplemental Life Insurance  64. Supplemental Life Insurance  65. Supplemental Life Insurance  65. Supplemental Life Insurance  66. Supplemental Life Insurance  67. Supplemental Life Insurance  68. Supplemental Life Insurance  68. Supplemental Life Insurance  69. Supplemental Life Insurance		5f.	Domestic support obligations	5f.	\$		\$		
Supplemental Life Insurance Supplemental Life Supplemental Life Insurance Supplemental Computer Supplemental Supplem		5g.	Union dues	5g.	\$		\$		
Supplemental Life Insurance  Spouse / Child Life Insurance  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Add the aparoll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Add the aparoll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Add the aparoll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 2,413.66 \$ 1,954.68  1,954		5h.	Other deductions. Specify: Accident Insurance		\$		+ \$		
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13. Do you expect an increase or decrease within the year after you file this form?  No.									ne .
	13.	Do yo	ou expect an increase or decrease within the year after you file this form	?					-
☐ Yes. Explain:			No.						
			Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill in this	s informa	tion to identify you	ur case:						
						O.I.	1. 26 (1. 2.	•-	
Debtor 1		Scott Michae	Long			□ Che	eck if this	is: ended filing	
Debtor 2		Nancy Diana	Long					Ū	ving postpetition chapter
(Spouse,	if filing)					_			the following date:
United Sta	ates Bankr	ruptcy Court for the:		ERN DISTRICT OF ALAB RN DIVISION	AMA,		MM / D	D / YYYY	
Case num (If known)									
		rm 106J				l			
Sche	dule	J: Your E	Expen	ses					12/1
Part 1:  1. Is ti	Describis a joir No. Go to Yes. Doe	ore space is nee n). Answer every ibe Your Housel nt case? b line 2. s Debtor 2 live in o es. Debtor 2 must	ded, attacy question hold  n a separa		form. On the top of	any addit	ional pa	ponsible fo ges, write y	r supplying correct our name and case
2. <b>Do</b>	you have	e dependents?	☐ No						
	not list Do otor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dep age	pendent's	Does dependent live with you?
Do	not state	the							□ No
	endents				Son		13		■ Yes
									□ No
					Son		18		■ Yes
									□ No
									Yes
									□ No
exp	enses o	penses include f people other th d your depender	nan □	No Yes					□ Yes
	e your exes as of a		ur bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp					
the valu		n assistance and		government assistance i luded it on <i>Schedule I:</i> )				Your expe	enses
		or home ownersh and any rent for the		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$		750.00
lf n	ot includ	led in line 4:							
4a.	Real e	estate taxes				4a.	\$		0.00
4b.		rty, homeowner's				4b.	·		0.00
4c.		maintenance, rep				4c.	·		200.00
4d. 5. <b>Ad</b>		owner's associati		iominium dues <b>ur residence</b> , such as ho	me equity loops	4d. 5.			0.00
J. Au	antional I	norigage payine	ins for yo	ui residence, such as no	me equity loans	ວ.	Ψ		0.00

Debtor 1 Debtor 2	Scott Michael Long Nancy Diana Long	Casa num	ber (if known)	
Debioi 2	Nailey Dialia Long	Case num	Dei (ii Kilowii)	
-	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	350.00
6b.	Water, sewer, garbage collection	6b.	\$	70.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	225.00
6d.	Other. Specify:	6d.	·	0.00
	od and housekeeping supplies	7.	\$	900.00
	Idcare and children's education costs	8.	\$	450.00
	thing, laundry, and dry cleaning	9.	\$	100.00
	sonal care products and services	10.	\$	300.00
	dical and dental expenses	11.	\$	100.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	400.00
13. <b>Ent</b>	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. <b>Ch</b> a	aritable contributions and religious donations	14.	\$	100.00
15. <b>Ins</b>				
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	·	0.00
	. Health insurance	15b.	*	0.00
15c	. Vehicle insurance	15c.	\$	323.00
	. Other insurance. Specify:	15d.	\$	0.00
	<b>res.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00
	tallment or lease payments:			
	. Car payments for Vehicle 1	17a.	·	0.00
	. Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	. Other. Specify:	17d.	\$	0.00
dec	ur payments of alimony, maintenance, and support that you did not report a lucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	_	
	er real property expenses not included in lines 4 or 5 of this form or on Sci			0.00
	. Mortgages on other property	20a.	·	0.00
	. Real estate taxes	20b.		0.00
	. Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	· —	0.00
20e	. Homeowner's association or condominium dues	20e.	·	0.00
21. <b>Oth</b>	er: Specify:	21.	+\$	0.00
22. <b>Cal</b>	culate your monthly expenses			
	. Add lines 4 through 21.		\$	4,268.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	.,200.00
	. Add line 22a and 22b. The result is your monthly expenses.		\$	4,268.00
23. <b>Cal</b>	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,368.34
	Copy your monthly expenses from line 22c above.	23b.	· · · · · · · · · · · · · · · · · · ·	4,268.00
_55		_00.	·	7,2000
230	. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	100.34
For mod				or decrease because of a
Ц,	Yes. Explain here:			

ebtor 1	Scott Michael Lo	na		
	First Name	Middle Name	Last Name	
ebtor 2	Nancy Diana Lon	ıg		
pouse if, filing)	First Name	Middle Name	Last Name	
nited States Ba	ankruptcy Court for the:	NORTHERN DISTR	ICT OF ALABAMA, EASTERN DIVISION	
ase number				
known)				☐ Check if this is an amended filing
fficial Forn	n 106Dec			
eclarat	ion About a	an Individu	al Debtor's Schedule	<b>es</b> 12/15
vo married pe	eople are filing togethe	r, both are equally res	sponsible for supplying correct informa	tion.
u must fila thi	s form whenever you fi	ile hankruntov schedi	ules or amended schedules. Making a fa	ulse statement concealing property or
taining money		n connection with a b	ules or amended schedules. Making a fa pankruptcy case can result in fines up to	alse statement, concealing property, or \$250,000, or imprisonment for up to 20
taining money	y or property by fraud in	n connection with a b		
taining money ars, or both. 1	y or property by fraud in	n connection with a b		
taining money ars, or both. 1 Sigi	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below	n connection with a b		\$250,000, or imprisonment for up to 20
taining money ars, or both. 1	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below	n connection with a b	eankruptcy case can result in fines up to	\$250,000, or imprisonment for up to 20
signation of the state of the s	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below	n connection with a b	eankruptcy case can result in fines up to	\$250,000, or imprisonment for up to 20
Sign  Did you pa	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below ny or agree to pay some	n connection with a b	eankruptcy case can result in fines up to ttorney to help you fill out bankruptcy fo	expressions or imprisonment for up to 20 orms?
Sign  Did you pat  No  Yes. N	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below  by or agree to pay some	n connection with a b	ttorney to help you fill out bankruptcy fo	expressions or imprisonment for up to 20 orms?  ach Bankruptcy Petition Preparer's Notice, inclaration, and Signature (Official Form 119)
Sign  Did you par  No  Yes. N	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below  by or agree to pay some	n connection with a b	eankruptcy case can result in fines up to ttorney to help you fill out bankruptcy fo	expressions or imprisonment for up to 20 orms?  ach Bankruptcy Petition Preparer's Notice, inclaration, and Signature (Official Form 119)
Did you pa	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 in Below  By or agree to pay some Name of person  Ilty of perjury, I declare e true and correct.	n connection with a b	ttorney to help you fill out bankruptcy for the ban	eclaration and
Did you pa	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below  by or agree to pay some Name of person	n connection with a b	ttorney to help you fill out bankruptcy fo	eclaration and
Did you pay  No Yes. N  Under pena that they are X  //s/ Scott N	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 in Below  By or agree to pay some Name of person  Ity of perjury, I declare e true and correct.  out Michael Long	n connection with a b	ttorney to help you fill out bankruptcy for the summary and schedules filed with this discussion.	eclaration and
Did you pay  No Yes. N  Under pena that they are X  X /s/ Scott N  Signature	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 in Below  Name of person  Ity of perjury, I declare e true and correct.  ott Michael Long  Michael Long	n connection with a b	ttorney to help you fill out bankruptcy for the summary and schedules filed with this downward Nancy Diana Long Nancy Diana Long	eclaration and

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

				•
Fill in this infor	mation to identify your o	case:		
Debtor 1	Scott Michael Lon		LastNama	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	Nancy Diana Long	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ALA	ABAMA, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo		ffaire for Individual	ls Filing for Bankruptc	<b>V</b> 4/19
Be as complete information. If r	and accurate as possibl	e. If two married people are fili ttach a separate sheet to this fo	ng together, both are equally respor	nsible for supplying correct
Part 1: Give	Details About Your Mari	tal Status and Where You Lived	d Before	
1. What is you	ur current marital status	?		
■ Marrie				
2. During the	last 3 years, have you liv	ved anywhere other than where	e vou live now?	
_	, , , , , , , , , , , , , , , , , , , ,	,	. •	
□ No				
■ Yes. Li	ist all of the places you live	ed in the last 3 years. Do not inclu	ude where you live now.	
Debtor 1 P	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
	shall Road e, AL 35986	From-To: <b>10/2015 - 5/2018</b>	■ Same as Debtor 1	Same as Debtor 1 From-To:
Apt. 6	IcCurdy Ave. e, AL 35986	From-To: <b>12/2017 - 5/2018</b>	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
			uivalent in a community property sta New Mexico, Puerto Rico, Texas, Was	
☐ Yes. M	lake sure you fill out Sche	dule H: Your Codebtors (Official I	Form 106H).	
Part 2 Expla	ain the Sources of Your I	ncome		
Fill in the to	tal amount of income you	received from all jobs and all bus	usiness during this year or the two prinesses, including part-time activities. ther, list it only once under Debtor 1.	revious calendar years?
□ No				
Yes. F	ill in the details.			
	Ir	Debtor 1	Debtor 2	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			Debtor 1		Debtor 2		
	From January 1 of current year until		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	y 1 of current filed for bank		■ Wages, commissions, bonuses, tips	\$10,579.00	☐ Wages, commissions, bonuses, tips	\$9,467.00	
			☐ Operating a business		Operating a business		
For last caler (January 1 to	ndar year: December 31	l, <b>2018</b> )	■ Wages, commissions, bonuses, tips	\$42,987.00	☐ Wages, commissions, bonuses, tips	\$27,255.00	
			☐ Operating a business		Operating a business		
	dar year befo December 31		■ Wages, commissions, bonuses, tips	\$40,885.00	☐ Wages, commissions, bonuses, tips	\$27,011.00	
			☐ Operating a business		Operating a business		
□ No ■ Yes.	Fill in the deta	ils.	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income	
				Gross income from each source		Gross income (before deductions	
				(before deductions and exclusions)		and exclusions)	
For last cale: (January 1 to	ndar year: December 31	l, <b>2018</b> )	Rental Income	\$5,733.00			
				\$0.00	Foodstamps	\$1,793.00	
	-		Made Before You Filed for				
6. Are eithe □ No.	Neither Deb	tor 1 nor D	s debts primarily consume ebtor 2 has primarily consu personal, family, or househo	umer debts. Consumer debts	are defined in 11 U.S.C. § 10	11(8) as "incurred by an	
	During the 9	0 days befo	re you filed for bankruptcy, di	id you pay any creditor a total	of \$6,825* or more?		
	_	Go to line 7					
		paid that cre not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig his bankruptcy case.	n one or more payments and t ations, such as child support a or after the date of adjustment	and alimony. Also, do	
■ Voc	,	•	r both have primarily consu		or and the date of adjustifiering		
<b>–</b> res.				d you pay any creditor a total	of \$600 or more?		
	■ No.	Go to line 7					
	□ Yes	List below e	ach creditor to whom you pai		the total amount you paid tha port and alimony. Also, do not		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

		cott Michael Long ancy Diana Long		Cas	se number (if knowl	n)	
	Creditor	r's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
7.	Insiders in of which y	year before you filed for bankrupt nclude your relatives; any general pa you are an officer, director, person in ss you operate as a sole proprietor. 1	artners; relatives of any gent control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which y g securities; and	ou are a genera any managing a	al partner; corporations agent, including one for
	■ No Yes.	. List all payments to an insider.					
	Insider's	s Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insider? Include pa	year before you filed for bankrupt ayments on debts guaranteed or cos		yments or transfer a	any property on	account of a d	ebt that benefited an
		. List all payments to an insider  s Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	ilisidei	s Name and Address	Dates of payment	paid	still owe		
9.	List all su	year before you filed for bankrupt ich matters, including personal injury ions, and contract disputes.					
		. Fill in the details.	Nature of the case	Court or agency		Status of th	ne case
	Yes.  Case titl  Case nu	le umber	Nature of the case	Court or agency		Status of th	ne case
	Yes. Case titl Case nu Redsto Scott M	le	Nature of the case Collections	Court or agency District Court of County, Alaba	of DeKalb	Status of the Pending On appe	l eal
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le umber one Federal Credit Union V. //. Long AKA Michael Long	Collections  cy, was any of your prop	District Court of County, Alaba	of DeKalb ma	■ Pending □ On appe □ Conclud	l eal led
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le Jumber	Collections  cy, was any of your prop	District Court of County, Alaba	of DeKalb ma foreclosed, garn	■ Pending □ On appe □ Conclud	eal led d, seized, or levied?
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le Jumber	Collections  cy, was any of your prop	District Court of County, Alabai	of DeKalb ma	■ Pending □ On appe □ Conclud	l eal led
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le Jumber	Collections  cy, was any of your prop  Describe the Property  Explain what happene  Residential Property  Marshall Road Rains  Kalb County	District Court of County, Alabase erty repossessed, for the county of th	of DeKalb ma foreclosed, garn Date	■ Pending □ On appe □ Conclud	eal led d, seized, or levied? Value of the
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le umber one Federal Credit Union V. II. Long AKA Michael Long 2018-900487  year before you filed for bankrupt I that apply and fill in the details below Go to line 11.  Fill in the information below.  r Name and Address  as ankruptcy ox 18001	Collections  cy, was any of your prop  Describe the Property  Explain what happene  Residential Property  Marshall Road Rain  Kalb County  Property was reposs	District Court of County, Alabar erty repossessed, for the county of the	of DeKalb ma foreclosed, garn Date	Pending On appe Conclud	eal led d, seized, or levied?  Value of the property
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le umber one Federal Credit Union V. II. Long AKA Michael Long 2018-900487  year before you filed for bankrupt I that apply and fill in the details below Go to line 11.  Fill in the information below.  r Name and Address  as ankruptcy ox 18001	Collections  cy, was any of your prop  Describe the Property  Explain what happene  Residential Property  Marshall Road Rain: Kalb County  Property was reposs  Property was foreclo	District Court of County, Alabar erty repossessed, 1  d y located at 1452 sville, AL 35986 essed.	of DeKalb ma foreclosed, garn Date	Pending On appe Conclud	eal led d, seized, or levied?  Value of the property
10.	Yes. Case titl Case nu Redsto Scott N 28-SM-	le umber one Federal Credit Union V. II. Long AKA Michael Long 2018-900487  year before you filed for bankrupt I that apply and fill in the details below Go to line 11.  Fill in the information below.  r Name and Address  as ankruptcy ox 18001	Collections  cy, was any of your prop  Describe the Property  Explain what happene  Residential Property  Marshall Road Rain  Kalb County  Property was reposs	District Court of County, Alabar erty repossessed, for the county of the	of DeKalb ma foreclosed, garn Date	Pending On appe Conclud	eal led d, seized, or levied?  Value of the property

Statement of Financial Affairs for Individuals Filing for Bankruptcy

_	otor 1 otor 2	Scott Michael Long Nancy Diana Long		Case number	(if known)				
11.	accol	n 90 days before you filed for bankr unts or refuse to make a payment be No Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any	amounts from your			
	Cred	itor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount			
12.	court	n 1 year before you filed for bankrup -appointed receiver, a custodian, or No 'es		as any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a			
Par	t 5:	List Certain Gifts and Contributions	s						
13.	Gifts	n 2 years before you filed for bankru No Yes. Fill in the details for each gift. with a total value of more than \$60 person		did you give any gifts with a total value of more the Describe the gifts	han \$600 per person  Dates you gave the gifts	? Value			
		on to Whom You Gave the Gift and			o go				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No  Yes. Fill in the details for each gift or contribution.								
	more Char	or contributions to charities that to than \$600 ity's Name 'ess (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value			
Par		List Certain Losses							
15.	Withi		otcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,			
	_	No Yes. Fill in the details.							
	Desc	cribe the property you lost and the loss occurred	Include	the any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Par	t 7:	List Certain Payments or Transfers	i						
16.	consi	ulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on going a bankruptcy petition? s, or credit counseling agencies for services required		erty to anyone you			
	□ 1	No							
		es. Fill in the details.							
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Carl	a M. Handy			4/2019	\$1,100.00			
	CIN	Legal			4/2019	\$66.00			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Debtor 2	- U		C	ase number	(if known)	
Add Ema	son Who Was Paid dress ail or website address son Who Made the Payment, if Not You EFA	Description and variansferred	∕alue of any prope	erty	Date payment or transfer was made 4/2019	Amount of payment \$50.00
pron	in 1 year before you filed for bankruptc nised to help you deal with your credito ot include any payment or transfer that you	rs or to make payments			or transfer any prope	erty to anyone who
	No					
	Yes. Fill in the details. son Who Was Paid dress	Description and v	value of any prope	erty	Date payment or transfer was made	Amount of payment
trans Inclu inclu	in 2 years before you filed for bankrupts sferred in the ordinary course of your be de both outright transfers and transfers ma de gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a se		perty to anyone, othe	
Per	son Who Received Transfer dress		property transferred payme		any property or received or debts change	Date transfer was made
	son's relationship to you rd Party	1999 Jeep Wrar	ngler	car for deduction debtor's	s used to buy a ebtor and	5/2018
bene ■ —	in 10 years before you filed for bankrup eficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a se	elf-settled tru	ust or similar device	of which you are a
	ne of trust	Description and v	alue of the prope	erty transferr	ed	Date Transfer was made
Part 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Stor	age Units		
sold Inclu hous	in 1 year before you filed for bankrupto, moved, or transferred? ude checking, savings, money market, oses, pension funds, cooperatives, assoc No Yes. Fill in the details.	y, were any financial ac	counts or instrun	nents held ir		
	ne of Financial Institution and dress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of accoun instrument	clo	te account was esed, sold, eved, or nsferred	Last balance before closing or transfer
Reg	gions Bank	xxxx-	■ Checking □ Savings		2018	\$0.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Money Market☐ Brokerage☐ Other\_\_

	otor 1 otor 2	Scott Michael Long Nancy Diana Long				Cas	se number (if known)	
		e of Financial Institution and ress (Number, Street, City, State and ZIP		Last 4 digits of account number Type of account number		ınt c	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Reg	Regions Bank		XXXX- ☐ Checking ■ Savings ☐ Money Marl ☐ Brokerage ☐ Other		ket	9/2018	\$100.00
21.		ou now have, or did you have within 1 y or other valuables?	year b	efore you filed fo	or bankruptcy, ar	ny sa	afe deposit box or other deposit	ory for securities,
	_	No Yes. Fill in the details.						
		e of Financial Institution 'ess (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Des	scribe the contents	Do you still have it?
22.	_	you stored property in a storage unit o	or plac	ce other than you	ır home within 1	yea	r before you filed for bankruptcy	??
		Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)			Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		scribe the contents	Do you still have it?	
Par	t 9:	Identify Property You Hold or Control	for S	omeone Else				
23.	for so	ou hold or control any property that so omeone.	meon	e else owns? Inc	lude any propert	у ус	ou borrowed from, are storing fo	r, or hold in trust
	_	No Yes. Fill in the details.						
	Own	er's Name 'ess (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Des	scribe the property	Value
Par	t 10:	Give Details About Environmental Info	ormat	ion				
For	the pu	rpose of Part 10, the following definiti	ons a	pply:				
	toxic	conmental law means any federal, state substances, wastes, or material into tl ations controlling the cleanup of these	he air,	, land, soil, surfa	ce water, ground			
		neans any location, facility, or property rn, operate, or utilize it, including dispo	•	•	environmental l	aw,	whether you now own, operate,	or utilize it or used
		rdous material means anything an env dous material, pollutant, contaminant,			s as a hazardous	was	ste, hazardous substance, toxic	substance,
Rep	ort all	notices, releases, and proceedings the	at you	ı know about, reç	ardless of when	the	ey occurred.	
24.	Has a	nny governmental unit notified you that	t you	may be liable or <sub>l</sub>	ootentially liable	und	ler or in violation of an environm	ental law?
	_	No Yes. Fill in the details.						
		e of site		Governmental u	nit		Environmental law, if you	Date of notice
		Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  ZIP Code)					know it	24.00.1101100

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb				Cas	e number (if known)	
25.	Ha	ve you notified any governmental unit of	f any release of hazardous material?			
	_		·			
		No Yes. Fill in the details.				
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
26.	Ha	ve you been a party in any judicial or ad	ministrative proceeding under any envir	ronn	nental law? Include settlements	and orders.
		No				
		Yes. Fill in the details.				
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	t 11	Give Details About Your Business or	Connections to Any Business			
27.	Wit	thin 4 years before you filed for bankrup	tcy, did you own a business or have any	v of	the following connections to an	v business?
			in a trade, profession, or other activity,		_	,
			pany (LLC) or limited liability partnershi			
		☐ A partner in a partnership	,, (, ,, ,, ,, ,	F (-	,	
		☐ An officer, director, or managing ex	recutive of a cornoration			
		_	ng or equity securities of a corporation			
	_					
	_	No. None of the above applies. Go to				
	□ B:	res. Check all that apply above and til	I in the details below for each business.  Describe the nature of the business		Employer Identification number	ar.
	Ac	Idress Imber, Street, City, State and ZIP Code)			Do not include Social Security	
	(140	iniber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	
		thin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, did you give a financial statement to	o an	yone about your business? Incl	lude all financial
		No				
		Yes. Fill in the details below.				
		nme Idress	Date Issued			
		Imber, Street, City, State and ZIP Code)				
Par	t 12	Sign Below				
are t vith	rue a b	and correct. I understand that making a	nancial Affairs and any attachments, and false statement, concealing property, o \$250,000, or imprisonment for up to 20	or ob	taining money or property by fi	
/s/ :	Sco	ott Michael Long	/s/ Nancy Diana Long			
		Michael Long ure of Debtor 1	Nancy Diana Long Signature of Debtor 2			
Date		April 25, 2019	Date _April 25, 2019			
Did v	you	attach additional pages to Your Statem	ent of Financial Affairs for Individuals F	ilino	for Bankruptcy (Official Form 1	107)?
■ N		. p. <b>5</b>		-3	<b>7, (</b>	,
JΥ	es					
Did y ■ N		pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy	forms?	
		· · · · · · · · · · · · · · · · · · ·	uptcy Petition Preparer's Notice, Declaratio			
Offici	al Fo	orm 107 Staten	nent of Financial Affairs for Individuals Filing	for E	Bankruptcy	page

Case 19-40701-JJR7 Doc 1 Filed 04/26/19 Entered 04/26/19 14:47:37 Desc Main Document Page 44 of 60

Best Case Bankruptcy

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Fill in this infor	motion to identify your coor			1
FIII IN this infor	mation to identify your case	<b>e</b> :		
Debtor 1	Scott Michael Long First Name	Middle Name	Last Name	
Debtor 2	Nancy Diana Long	Widdle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NO	ORTHERN DISTR	RICT OF ALABAMA, EASTERN DIVISION	
Case number				
(if known)				Check if this is an amended filing
Official Fo		for Indivi	duals Filing Under Chapt	er 7 12/15
If you are an ind	lividual filing under chapter	7, you must fill o	out this form if:	
creditors have	e claims secured by your p	roperty, or		
You must file th	ever is earlier, unless the co	n 30 days after yo	expired.  ou file your bankruptcy petition or by the date s time for cause. You must also send copies to th	
	eople are filing together in a	i joint case, both	are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possible. It		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	our Creditors Who Have Se	cured Claims		
-				
1. For any credit information b		of Schedule D: 0	Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	reditor and the property that is	s collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's \	N.S. Badcock Corp.		■ Surrender the property.	■ No
name:	·		Retain the property and redeem it.	_ 116
Description of	f Dresser; mirror; queer	n size bed,	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt	rails and headboard		☐ Retain the property and [explain]:	
For any unexpir in the information	on below. Do not list real es	that you listed in tate leases. Unex	Schedule G: Executory Contracts and Unexpir cpired leases are leases that are still in effect; the e trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your	unexpired personal property	y leases		Will the lease be assumed?
Lessor's name:	anad			□ No
Description of le Property:	ased			☐ Yes
Lessor's name:	agad			□ No
Description of le Property:	aseu			☐ Yes
Lessor's name:				
Official Form 108	;	Statement of Inte	ention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Debtor 1 Debtor 2	Scott Michael Long Nancy Diana Long	Case number (if known)	
Descriptio Property:	n of leased	□ No	
		☐ Yes	
Lessor's n	ame: n of leased	□ No	
Property:	To reased	☐ Yes	
Lessor's n	ame: n of leased	□ No	
Property:	n or leased	☐ Yes	
Lessor's n		□ No	
Property:	n of leased	☐ Yes	
Lessor's n		□ No	
Property:	n of leased	□ Yes	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Debtor 1 Debtor 2	•	Coop number (*/
Debioi 2	Nancy Diana Long	Case number (if known)
Part 3:	Sign Below	
	enalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
X /s/	Scott Michael Long	X /s/ Nancy Diana Long
Sc	ott Michael Long	Nancy Diana Long
Sig	nature of Debtor 1	Signature of Debtor 2
Da	te April 25, 2019	Date

Statement of Intention for Individuals Filing Under Chapter 7

page 3

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						_					
Fill in this	s information to identify you	r case:							irected	in this form and	in Form
Debtor 1	Scott Michael Lo	ong				122	2A-1Su	pp:			
Debtor 2		ng					■ 1. TI	here is no pres	umptior	of abuse	
	tates Bankruptcy Court for		District	of Ala	ıbama, Eastern		а		nade ur	mine if a presum der <i>Chapter 7 l</i> rm 122A-2).	
Case nul	mber					ן נ				ot apply now be e but it could ap	
							□ Che	eck if this is a	n ame	nded filing	
Officia	al Form 122A -	<u>1</u>									
Chap	ter 7 Statemen	t of You	r Cu	rre	nt Monthl	y Inc	ome	е			12/15
attach a se case numl	plete and accurate as possite parate sheet to this form. In per (if known). If you believe military service, complete ar Calculate Your Curren	clude the line nui that you are exen nd file <i>Statement</i>	nber to npted fro of Exem	which om a p	the additional info	ormation a	pplies. se you	On the top of a do not have pring	ny addit narily co	ional pages, write onsumer debts o	e your name and r because of
				nh.							
	at is your marital and filin Not married. Fill out Colum	•	k one o	my.							
	Married and your spouse	·	u. Fill c	out ho	th Columns A and	d R lines	2-11				
	Married and your spouse						<b>Z</b> -11.				
	☐ Living in the same hou	•	•				umns /	A and B, lines	2-11.		
	☐ Living separately or are	legally separa	ted. Fill	out C	Column A, lines 2-	11; do no	t fill ou	t Column B. By	checki	ng this box, you	declare under
	penalty of perjury that yo living apart for reasons t									at you and your	spouse are
101(10 the 6 m	the average monthly income A). For example, if you are filin the income for all 6 s own the same rental property	that you received g on September 19 months and divide	I from al 5, the 6-1 e the tota	I sour month al by 6	ces, derived during period would be Ma . Fill in the result. Do	g the 6 full arch 1 throu o not includ	l month igh Aug le any ir	s before you file ust 31. If the amo	e this ba ount of your ore than	our monthly incom once. For example	e varied during le, if both
							Colum Debto			nn B or 2 or iiling spouse	
	ır gross wages, salary, tip roll deductions).	os, bonuses, ov	ertime	, and	commissions (b	efore all	\$	3,527.31	\$	0.00	
3. Alir	mony and maintenance pa umn B is filled in.	ayments. Do no	t include	e pay	ments from a spo	use if	\$	0.00	\$	0.00	
of y from and	amounts from any source rou or your dependents, in an unmarried partner, me roommates. Include regula d in. Do not include payme	ncluding child a mbers of your har contributions f	suppor ousehol rom a s	<b>t.</b> Incl	ude regular contr ur dependents, pa	ibutions arents,	\$	0.00	\$	0.00	
5. Net	income from operating a		ession btor 1	, or fa	arm Debtor 2						
ded	ss receipts (before all uctions)	\$	0.00	\$	1,550.31						
ope	inary and necessary rating expenses	-\$	0.00	<b>-</b> \$ _	0.00	•					
	monthly income from a iness, profession, or farm	\$	0.00	\$_	1,550.31	Copy here ->	\$	0.00	\$	1,550.31	
6. <b>Net</b>	income from rental and o	other real prope	erty								
			¢		Debtor 1 683.33						
	ss receipts (before all dedu	*	\$ -\$		0.00						
	inary and necessary opera monthly income from renta	• .	Ψ			Сору					
1	perty	a or other real	\$		683.33	here ->	\$	683.33	\$	0.00	

Official Form 122A-1

property

**Chapter 7 Statement of Your Current Monthly Income** 

0.00

\$

page 1

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7. Interest, dividends, and royalties

0.00

Case number (if known)

							Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unem	ployment compensation					\$	0.00	\$	0.00	
		enter the amount if you cocial Security Act. Instead,		nt received was a be	enefit u	nder			· <del></del>		
		you		\$	0.00						
		your spouse			0.00	_					
9.	Pensi	on or retirement income. under the Social Security	Do not include any ar	mount received that	was a	=	\$	0.00	\$	0.00	
10.	Do not receive		ived under the Social ne, a crime against hu	Security Act or payi manity, or internation a separate page an	ments onal or		\$	0.00	<del></del>	0.00	
						_	\$	0.00	\$	0.00	
		Total amounts from sep	arate pages if any				\$	0.00	\$	0.00	
		rotal amounts from 30p	arate pages, ir arry.				Ψ		Ψ		
11.		ate your total current me olumn. Then add the total			or \$		4,210.64	+ -	1,550.31	= \$	5,760.95
										Total o	current monthly
Part	2:	Determine Whether the	Means Test Applies	to You							•
12.	Calcul	ate your current monthly	y income for the yea	r. Follow these step	s:						
	12a. C	opy your total current mor	nthly income from line	11			Сор	y line 11	here=>	\$	5,760.95
	N	fultiply by 12 (the number	of months in a year)							X	12
	12b. T	he result is your annual in	come for this part of th	ne form					12b	p. \$	69,131.40
13.	Calcul	ate the median family in	come that applies to	you. Follow these	steps:						
	Fill in t	he state in which you live.		AL							
	Fill in t	he number of people in yo	our household.	4							
		he median family income	•						13.	\$	78,456.00
	To find for this	I a list of applicable media form. This list may also b	n income amounts, go e available at the ban	online using the lir kruptcy clerk's office	nk spec e.	ified i	n the separ	ate instruc	tions		
14.	How d	lo the lines compare?									
	14a.	Line 12b is less that Go to Part 3.	n or equal to line 13. C	On the top of page 1	, check	k box	1, There is	no presun	nption of abus	se.	
	14b.	Line 12b is more that Go to Part 3 and fill	an line 13. On the top out Form 122A-2.	of page 1, check bo	ox 2, <i>Th</i>	he pre	sumption o	f abuse is	determined b	y Form 1	22A-2.
Part	3:	Sign Below									
	В	y signing here, I declare u	nder penalty of perjury	y that the information	n on th	nis sta	tement and	in any att	achments is t	rue and c	orrect.
	v	/o/ Coott Michael Lor		•	v /a/ l	Nana	v Diana I				
	X	/s/ Scott Michael Long Scott Michael Long	ig				y Diana L Diana Lon				
		Signature of Debtor 1					of Debtor 2				
	Date	April 25, 2019		Dat	·		, 2019				
		MM / DD / YYYY					/ YYYY				
	If	you checked line 14a, do	NOT fill out or file For	m 122A-2.							
	If	you checked line 14b, fill	out Form 122A-2 and	file it with this form.							
		<u> </u>									

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2018 to 03/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: The Childrens Place

Income by Month:

6 Months Ago:	10/2018	\$3,545.21
5 Months Ago:	11/2018	\$4,376.39
4 Months Ago:	12/2018	\$2,663.58
3 Months Ago:	01/2019	\$3,164.44
2 Months Ago:	02/2019	\$3,167.18
Last Month:	03/2019	\$4,247.03
	Average per month:	\$3,527.31

#### Line 6 - Rent and other real property income

Source of Income: Rent from 1452 Marshall Rd., Rainsville

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	10/2018	\$0.00	\$0.00	\$0.00
5 Months Ago:	11/2018	\$820.00	\$0.00	\$820.00
4 Months Ago:	12/2018	\$820.00	\$0.00	\$820.00
3 Months Ago:	01/2019	\$820.00	\$0.00	\$820.00
2 Months Ago:	02/2019	\$820.00	\$0.00	\$820.00
Last Month:	03/2019	\$820.00	\$0.00	\$820.00
_	Average per month:	\$683.33	\$0.00	
			Average Monthly NET Income:	\$683.33

otor 1	Scott wichaer Long		
otor 2	Nancy Diana Long	Case number (if known)	

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 10/01/2018 to 03/31/2019.

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: Backwoods Velocity

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	10/2018	\$0.00	\$0.00	\$0.00
5 Months Ago:	11/2018	\$1,444.23	\$0.00	\$1,444.23
4 Months Ago:	12/2018	\$927.72	\$0.00	\$927.72
3 Months Ago:	01/2019	\$1,900.65	\$0.00	\$1,900.65
2 Months Ago:	02/2019	\$2,468.10	\$0.00	\$2,468.10
Last Month:	03/2019	\$2,561.15	\$0.00	\$2,561.15
	Average per month:	\$1,550.31	\$0.00	
			Average Monthly NET Income:	\$1,550.31

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	<u>\$15</u>	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### United States Bankruptcy Court Northern District of Alabama, Eastern Division

In	Scott Michael Long  Rancy Diana Long		Case No	1				
111	Nancy Diana Long	Debtor(s)	Chapter					
		G						
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pa	id to me, for services				
	For legal services, I have agreed to accept		\$	1,100.00				
	Prior to the filing of this statement I have received			1,100.00				
	Balance Due		\$	0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed comper	sation with any other person	unless they are me	embers and associates	of my law firm.			
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				y law firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	<ul><li>a. Analysis of the debtor's financial situation, and renderi</li><li>b. Preparation and filing of any petition, schedules, staten</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul>	nent of affairs and plan which	h may be required;	-	nkruptcy;			
6.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc adversary proceedings, conversion, reder	hargeability actions, jud	icial lien avoida		ay actions,			
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement fo	r payment to me fo	r representation of the	e debtor(s) in			
_	April 25, 2019	/s/ Carla M. Hand	dy					
	Date	Carla M. Handy						
		Signature of Attorn Bond, Botes & H						
		219 South 4th. S	treet					
		Gadsden, AL 359						
		256-485-0195 Fa						
		btaylor@bondan  Name of law firm	เนมปเธอ.เปที่					
		Transcoj van juni						

### United States Bankruptcy Court Northern District of Alabama, Eastern Division

In re	Nancy Diana Long		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	R MATRIX	
Γhe ab	ove-named Debtors hereby verify	hat the attached list of creditors is true and	correct to the best	of their knowledge.
Date:	April 25, 2019	/s/ Scott Michael Long		
		Scott Michael Long		
		Signature of Debtor		
Date:		/a/ Nanay Diana Lang		
	April 25, 2019	/s/ Nancy Diana Long		
	April 25, 2019	Nancy Diana Long  Nancy Diana Long		

**Scott Michael Long** 

W.S. Badcock Corp. P.O. Box 232 Mulberry, FL 33860 DeKalb Radiology Group LLC P.O. Box 11407 Birmingham, AL 35246 Quest Diagnostic P.O. Box 7306 Hollister, MO 65673

Anesthesia Associates, PA P.O. Box 8305 Gadsden, AL 35902

DeKalb Regional Medical Center 200 Medical Center Drive SW Fort Payne, AL 35968 Rapid Care Inc., ALB 9511 US Hwy 431 Albertville, AL 35950-0128

APP of Alabama ED PLLC P.O. Box 4458 Dept 175 Houston, TX 77210-4458 Gadsden Regional Medical Center P.O. Box 404799 Atlanta, GA 30384-4799 Redstone Federal Credit Union c/o Howard Grisham P.O. Box 5585 Huntsville, AL 35814

App of Alabama ED PLLC c/o Wakefield & Associates P.O. Box 50250 Knoxville, TN 37950-0250

Gadsden Regional Medical Center P.O. Box 14000 Belfast, ME 04915 Regions Attn: Bankruptcy P.O. Box 18001 Hattiesburg, MS 39404-8001

Barclays Bank Delaware Attn: Correspondence P.O. Box 8801 Wilmington, DE 19899 Gadsden Regional Medical Center c/o PASI P.O. Box 188 Brentwood, TN 37024 Target Attn: Bankruptcy P.O. Box 9475 Minneapolis, MN 55440

Capital One Attn: Bankruptcy P.O. Box 30285 Salt Lake City, UT 84130 Hemant K. Sinha PC P.O. Box 7027 Rainbow City, AL 35906-7027 Webbank Serviced By Lending Clu c/o JH Portfolio Debt Equities, LLC 5757 Phantom Dr. Ste 225 Hazelwood, MO 63042

Clinical Urology Associates 713 Goodyear Avenue Gadsden, AL 35903 MOHELA/Debt of Ed Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005 Wilson & Shelton, LLC P.O. Box 492 Rainsville, AL 35986

Creditors Bureau Association Attn: Bankruptcy 112 Ward St Macon, GA 31201 Northeast Imaging P.O. Box 11407 Birmingham, AL 35246-0910 Dekalb Ambulance Service c/o Creditors Bureau Associates of G 112 Ward St. Macon, GA 31204

Dekalb Ambulance Service P.O. Box 680643 Fort Payne, AL 35968 OneMain Financial Attn: Bankruptcy 601 Nw 2nd Street Evansville, IN 47708 JH Portfolio Debt Equities, LLC c/o Scott & Associates PC P.O. Box 115220 Carrollton, TX 75011-5220

Lending Club 71 Stevenson St., Ste. 300 San Francisco, CA 94105